



Town of Fort Myers Beach

TEMPORARY USE PERMIT APPLICATION

Applicant: _____

Address: _____

Phone Number: _____ Email: _____

STRAP Number: _____

Zoning: _____ Lighting Installed: yes/no

Type of Temporary Use: _____

Property Owner: _____ Phone: _____

Date(s) Requested: _____

ADDITIONAL INFORMATION

- A. Evidence that adequate sanitary facilities meeting the requirements of Lee County Health Department are provided.
- B. Evidence that sounds emanating from the temporary use shall not adversely affect any surrounding property.
- C. Evidence that all requirements providing sufficient parking and loading space are assured.
- D. When deemed necessary, a bond shall be posted, in addition to an agreement with a responsible person sufficient to guarantee that the ground area used during the conduct of the activity is resorted to a condition acceptable to the director.
- E. Evidence of public liability insurance and property damage insurance. This requirement may be waived by the Town Council.
- F. Where applicable, evidence that the applicant for a proposed use has complied with Town ordinances pertaining to Special Events, including Ordinances No.98-1, 00-16 and any later amendments.
- G. Evidence that the appropriate law enforcement and fire agencies who will be coordinating traffic control or emergency services have been advised of the plans for the temporary use and are satisfied with all aspects under their jurisdiction.

The undersigned applicant agrees to comply with the Town of Fort Myers Beach Land Development Code and any other applicable codes and certifies that to the best of his/her knowledge, the information submitted for the temporary permit is true and correct.

APPLICANT: _____ Date: _____

STAFF USE ONLY

Application Approved/Denied by: _____ Date: _____

Fee: **\$200** Paid: _____ Date: _____

Inspector: _____ Date: _____

Comments: _____